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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that all statements made on information and belief are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

BIRCH, STEWART, KOLOSCH & BIRCH, LLP or CUSTOMER NO. 2292  
P.O. Box 747 • Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

1. I hereby appoint the practitioners at (1) STONER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the U.S. and abroad in connection with this application and in connection with the resulting patent based on the instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignor provides said practitioners with a written notice to the contrary.

Send (in correspondence to)

Attorney Pocket No. 27-S6-00199P

[illegible]

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**BIRCH, STEWART, KOLASCH & BIRCH, LLP** or CUSTOMER NO. 2292

Send Correspondence to:

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on this application, and to execute all necessary documents and to take any action that may be required to prosecute this application and/or international application.

Attorney Docket No. 2:786 0199P

GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE		DATE
Residence (City, State & Country)		Tel Aviv ISRAEL		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)				
Mendels Street 44, 69548 Tel Aviv ISRAEL				
GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE		DATE
Residence (City, State & Country)		Ramat Khosravi		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)				
Yehuda Halevy Street 36, 46490 Herzliya ISRAEL				
GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE		DATE
Residence (City, State & Country)		Herzliya ISRAEL		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)				
Herzliya ISRAEL				
GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE		DATE
Residence (City, State & Country)		Herzliya ISRAEL		CITIZENSHIP
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Herzliya ISRAEL				
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Herzliya ISRAEL				
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Residence (City, State & Country)		Herzliya ISRAEL		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)				
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GIVEN NAME/FAMILY NAME		INVENTOR'S SIGNATURE		DATE
Residence (City, State & Country)		Herzliya ISRAEL		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)				
Herzliya ISRAEL				

DATE OF SIGNATURE

I hereby appoint the undersigned, at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected herewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary;

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PLEASE NOTE:  
YOU MUST  
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THE  
FOLLOWING:

Full Name of First  
or Second Inventor  
Last Name First  
Middle Initial if known

State Residence of  
Inventor(s)

Home Phone Office  
Address

Full Name of Second  
Inventor(s) if any

Full Name of Third  
Inventor(s) if any

Full Name of Fourth  
Inventor(s) if any

Full Name of Fifth  
Inventor(s) if any

Full Name of Sixth  
Inventor(s) if any

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GIVEN NAME/FAMILY NAME Kinneret SAVITZKY	INVENTOR'S SIGNATURE X	DATE* X
Residence (City, State & Country) Tel Aviv ISRAEL	CITIZENSHIP Israeli	
MAILING ADDRESS (Complete Street Address including City, State & Country) Metodela Street 44, 69545 Tel Aviv ISRAEL		
GIVEN NAME/FAMILY NAME Rami KHOSRAVI	INVENTOR'S SIGNATURE X	DATE* X
Residence (City, State & Country) Herzliya ISRAEL	CITIZENSHIP Israeli	
MAILING ADDRESS (Complete Street Address including City, State & Country) Yehuda Halevy Street 36, 46490 Herzliya ISRAEL		
GIVEN NAME/FAMILY NAME Menashe ELAZAR	INVENTOR'S SIGNATURE X Menashe Elazar	DATE* X 03/06/02
Residence (City, State & Country) Mevaseret Zion ISRAEL	CITIZENSHIP Israeli	
MAILING ADDRESS (Complete Street Address including City, State & Country) Haratzim Street 31, 90605 Mevaseret Zion ISRAEL		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	
MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
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